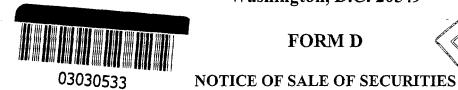
UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



FORM D

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

RECEIVED SEP 0 5 2003

OMB Number: 3235-0076 Expires: November 30, 2001 Estimated average burden hours per response ... 16.00

100	SEC US	E ONLY
155 4551101	Prefix	Serial

Name of Offering(check if this is an ar								
SILVERPOP SYSTEMS INC. ISSUA	CE OF SERIES	C CONVERTE	BLE PREFERRE	D STOCK A	AND WARRA	NIS		
Filing Under (Check Box(es) that apply):	Rule 504	□Rule 505	🔀 Rule 506	Sectio	on 4(6) UL	OE		
Type of Filing: New Filing	Amendment							
	A. BASIC I	DENTIFICATION TO THE PROPERTY OF THE PROPERTY	ON DATA					
1. Enter the information requested about	the issuer							
Name of Issuer (check if this is an as SILVERPOP SYSTEMS INC.	mendment and nan	ne has changed, a	and indicate change	e.)				
Address of Executive Offices	ber (Includir	ng Area Code)						
Eleven Piedmont Center, Suite 510	Atlanta, GA 303	305	(404) 262-4300					
Address of Principal Business Operations (if different from Executive Offices)	(Address)		Telephone Num	ber (Includir	ng Area Code)			
Brief Description of Business					PRC	CESSE		
E-mail services					SEP	1 2 2003		
Type of Business Organization ⊠ corporation □ limited par	tnership, already fo		ther (please specify			HOMSON INANCIAL		
☐ business trust ☐ limited par	tnership, to be for		mer (prease specif)	······································				
Actual or Estimated Date of Incorporation	n Organization:	Month 11	Year 1999	⊠ Actual	Estimated			
Jurisdiction of Incorporation or Organiza	tion: (Enter two-le		Service abbreviation la; FN for other for					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of pa and 	• •
● Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director Full Name (Last name first, if individual) Baumbach, Frederick A.	General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code) Eleven Piedmont Center, Suite 510, Atlanta, GA 30305	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Full Name (Last name first, if individual) Bloom, David J.	General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)	
Eleven Piedmont Center, Suite 510, Atlanta, GA 30305 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Full Name (Last name first, if individual)	General and/or Managing Partner
Shapiro, Aaron M. Business or Residence Address (Number and Street, City, State, Zip Code)	
Eleven Piedmont Center, Suite 510, Atlanta, GA 30305 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Gray Ventures, Inc.	
Business or Residence Address (Number and Street, City, State, Zip Code) 3350 Riverwood Parkway, Suite 1900, Atlanta, GA 30339	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Konsynski, Benn	
Business or Residence Address (Number and Street, City, State, Zip Code) Eleven Piedmont Center, Suite 510, Atlanta, GA 30305	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Full Name (Last name first, if individual) Nussey, William	General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code) 4177 Gateswalk Drive, Smyrna, GA 30080	

A. BASIC IDENTIFICATION DATA								
2. Enter the information requested for the following:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;								
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity								
securities of the issuer;								
 Each executive officer and director of corporate issuers and of corporate general and managing partners of part and 	nership issuers;							
• Each general and managing partner of partnership issuers.								
Duon gonoral and managing parater of paraterionip houses.								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner							
Full Name (Last name first, if individual)	5							
Draper Fisher Jurvetson Fund VI, L.P.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
400 Seaport Court, Suite 250, Redwood City, CA 94063								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or							
	Managing Partner							
Full Name (Last name first, if individual)								
Stavropoulos, Andreas								
Business or Residence Address (Number and Street, City, State, Zip Code)								
C/O Draper Fisher Jurvetson Fund VI, L.P., 400 Seaport Court, Suite 250, Redwood City, CA 94063	7.							
	General and/or Managing Partner							
Full Name (Last name first, if individual)								
Draper Fisher Jurvetson Partners VI, L.L.C.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
400 Seaport Court, Suite 250, Redwood City, CA 94063	7 6 1 1/							
	General and/or Managing Partner							
Full Name (Last name first, if individual)								
Draper Fisher Jurvetson ePlanet Ventures, L.P.	· · · · · · · · · · · · · · · · · · ·							
Business or Residence Address (Number and Street, City, State, Zip Code)								
400 Seaport Court, Suite 250, Redwood City, CA 94063	7 (11/-							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or							
Full Name (Last name first, if individual)	Managing Partner							
Labrador Ventures III, L.P.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
400 Seaport Court, Suite 250, Redwood City, CA 94063								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or							
· · · · · · · · · · · · · · · · · · ·	Managing Partner							
Full Name (Last name first, if individual)								
TTP Fund, LP								
Business or Residence Address (Number and Street, City, State, Zip Code)								
1230 Peachtree Street, Promenade II, Suite 1150, Atlanta, GA 30309								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner							
Full Name (Last name first, if individual)	- -							
McCormick, James								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Eleven Piedmont Center, Suite 510, Atlanta, GA 30305								

A. BASIC IDENTIFICATION DATA
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) NeoCarta Ventures, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code)
45 Fairfield Street, 4 th Floor, Boston, MA 20116
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Jackson, Margaret
Business or Residence Address (Number and Street, City, State, Zip Code)
C/O Neocarta Ventures, L.P., 45 Fairfield Street, 4th Floor, Boston, MA 20116

				B. II	NFORMA	TION AB	OUT OFF	ERING				
l. Ha	is the issue	r sold, or de	oes the issi	uer intend t	to sell, to n	on-accredi	ted investo	rs in this o	ffering?		Yes	
Answe	r also in Ap	opendix, Co	olumn 2, if	filing und	er ULOE.						<u>_</u>	
2. W	hat is the m	inimum in	vestment t	hat will be	accepted f	rom any in	dividual? .					N/A
3. Do	. Does the offering permit joint ownership of a single unit?									_		
ind sal or mo for	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. *											
(C	heck "All S	States" or c	heck indiv	idual State	s)	•••••	• • • • • • • • • • • • • • • • • • • •	*************		***************************************	📙	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] {OH}	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]		[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ame (Last n	ame first, i	f individua	al)								
Busine	ss or Resid	ence Addre	ess (Numb	er and Stre	et, City, St	ate, Zip Co	ode)					
Name o	of Associat	ed Broker	or Dealer									
States i	n Which P	erson Liste	d Has Soli	cited or In	tends to So	licit Purch	asers					
(C	heck "All S	States" or c	heck indiv	idual State	s)						🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

-6- 980596.2

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ <u> 0 </u>	\$ <u> </u>
	Equity	<u>\$4,500,000</u>	<u>\$4,449,644</u>
	Common Preferred	•	
	Convertible Securities (including warrants)	\$ <u>0</u>	\$ <u>0</u>
	Partnership Interests	\$ <u>0</u>	\$0_
	Other (Specify)	\$ <u>0</u>	\$ <u>0</u>
	Total	<u>\$4,500,000</u>	<u>\$4,449,644</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	<u>18</u>	<u>\$4,449,644</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	<u>18</u>	<u>\$4,449,644</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504, or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	0	\$ <u>0</u>
	Total	0	\$ <u> </u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ <u>20,000.00</u>
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)* to be paidonly if the issuer utilized registered broker-dealers for future		\$
	sales		
	Other Expenses		\$
	Total	\boxtimes	\$ <u>20,000.00</u>
	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted"		
	gross proceeds to the issuer."		\$4,429,644

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Payments to Officers, Directors & Affiliates		Payments To Others
Salaries and fees		\$		\$
Purchase of real estate		\$		\$
Purchase, rental or leasing and installation of machiner	y and equipment	\$		\$
Construction or leasing of plant buildings and facilities	· 🗆	\$		\$
Acquisition of other businesses (including the value of involved in this offering that may be used in exchange assets or securities of another issuer pursuant to a merg	for the	\$		\$ <u>1,700,000</u>
Repayment of indebtedness		¢		_
		Φ		\$
Working capital		\$	\boxtimes	<u>\$2,729,644</u>
Other (specify):		\$		\$
Column Totals		\$		\$
Total Payments Listed (column totals added)				<u>\$4,429,644</u>
D. FEI ne issuer has duly caused this notice to be signed by the use following signature constitutes an undertaking by the is citten request of its staff, the information furnished by the ale 502.	suer to furnish to the U.S. Sec	urities and Excha	nge Con	nmission, upon
suer (Print or Type)	Signature	•		Date
LVERPOP SYSTEMS INC.	Frederick A	Baurbah		8/29/200
ame of Signer (Print or Type)	Title of Signer (Print or T	ype)		
rederick A. Baumbach	Secretary			
	ATTENTION			

	E. STAT	E SIGNATURE					
1.	Is any party described in 17 CFR 230.262 presently subject provisions of such rule?	Yes No ⊠					
	See Appendix, Co	lumn 5, for state response.					
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.						
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.						
4.	The undersigned issuer represents that the issuer is familian Limited Offering Exemption (ULOE) of the state in which availability of this exemption has the burden of establishing	this notice is filed and understands that the issuer c					
	e issuer has read this notification and knows the contents to lersigned duly authorized person.	be true and has duly caused this notice to be signed	on its behalf by the				
Iss	uer (Print or Type)	Signature	Date				
SII	LVERPOP SYSTEMS INC.	Frederick A. Baumbork 8/29,					
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)					
Frederick A. Baumbach Secretary							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

-10- 980596.2

APPENDIX

1	<u> </u>	2	3		4						
1		d to sell	Type of security and aggregate	7				5 Disqualification under State ULOE if yes, attach			
:	investo	accredited rs in State 3-Item 1)	offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Series C Convertible Preferred Stock and Warrants	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AL											
AK											
AZ											
AR											
CA	X		\$2,000,000	6	\$2,000,000	0			X		
СО											
CT											
DE											
DC											
FL											
GA	X		\$1,294,644	9	\$1,294,644	0			X		
HI											
ID											
IL											
IN											
IA											
KS											
KY											
LA											
ME											
MD											
MA											
МІ											
MN											
MS											
MO											
MT											
NE							ļ				
NV											
NH											
NJ								1			
NM		<u> </u>									

APPENDIX

1	to non-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Series C Convertible Preferred Stock and Warrants	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
NY	X		\$1,150,000	2	\$1,150,000	0			X	
NC	X		\$5,000	1	\$5,000	1			X	
ND										
OH										
OK										
OR										
PA										
RI										
SC										
SD								ļ		
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										
WY										
PR										
								1		

-12- 980596.2